GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:2584
ANSWERED ON:05.12.2001
FAMILY PLANNING PROGRAMME
ALE NARENDRA;NAMDEO HARBAJI DIWATHE

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the rate of population growth in the country at present, State-wise;

(b) whether the Government have formulated any long-term integrated family planning policy for the near future;

(c) if so, the details thereof;

(d) whether family planning policy has taken a back seat due to lack of motivation and indifference of the Government;

(e) if so, whether the Government propose to review and reformulate this policy;

(f) if so, the details thereof; and

(g) if not, the reasons therefor?

Answer

MINISTER OF HEALTH AND FAMILY WELFARE (DR. C.P. THAKUR)

a.The state-wise statement on Decadal growth rate of population in the country is enclosed at Annexure-I.

b.to (g) Government has adopted National Population Policy, 2000 in February, 2000. The immediate objective of the Policy is to address the unmet needs of contraception, health infrastructure, health personnel and to provide integrated service delivery for basic reproductive and child health care. The medium term objective is to bring the total fertility rates to replacement level by 2010, through vigorous implementation of inter sectoral operational strategies. The long term objective is to achieve a stable population by 2045, at a level consistent with the requirements of sustainable economic growth, social development and environmental protection.

The Policy envisages some promotional/motivational measures for adoption of small family norm as given in the Annexure-II.

The Policy enumerates certain national socio-demographic goals to be achieved by 2010, which are expected to stabilize the population in the country by 2045; these are enclosed at Annexure-III. The Policy is being implemented.

Annexure-I

Decadal growth rate of population-States/Union territories 2001

India and State/Union Territories Decadal growth rate

INDIA 23.86 21.34

Jammu & Kashmir 30.34 29.04

Himachal Pradesh 20.79 17.53

Punjab 20.81 19.76

Chandigarh @ 42.16 40.33

Uttarnchal 24.23 19.20

Haryana 27.41 28.06

Delhi @ 51.45 46.31

Rajasthan 28.44 28.33

Uttar Pradesh 25.55 25.80

Bihar 23.33 28.43

Sikkim 28.47 32.98

Arunachal Pradesh 36.83 26.21

Nagaland 56.08 64.41

Manipur 29.29 30.02

Mizoram 39.70 29.18

Tripura 34.30 15.74

Meghalaya 32.86 29.94

Assam NA 18.85

West Bengal 24.73 17.84

Jharkhand 24.03 23.19

Orissa 20.06 15.94

Chhatisgarh 25.73 18.06

Madhya Pradesh 27.24 24.34

Gujarat 21.19 22.48

Daman & Diu @ 28.62 55.59

Dadra & Nagar Haveli @ 33.57 59.20

Maharashtra 25.73 22.57

Andhra Pradesh 24.20 13.86

Karnataka 21.12 17.25

Goa 16.08 14.89

Lakshadweep @ 28.47 17.19

Kerala 14.32 9.42

Tamil Nadu 15.39 11.19

Pondicherry @ 33.64 20.56

A & N Islands 48.70 23.94

Source: Office of the Registrar General India Census of India 2001 (Prov.Totals)

Annexure – II

Annexure referred to in reply to Lok Sabha Unstarred Question No.2584 for 05.12.2001

1.Panchayats and Zila Parishads will be rewarded and honoured for exemplary performance in universalising the small family norm, achieving reductions in infant mortality and birth rates and promoting literacy with completion of primary schooling.

2.The Balika Samridhi Yojana run by the Department of Women and Child Development, to promote survival and care of the girl child, will continue. A cash incentive of Rs.500 is awarded at the birth of the girl child of birth order 1 or 2.

3.Maternity Benefit Scheme run by the Department of Rural Development will continue. A cash incentive of Rs.500 is awarded to mothers who have their first child after 19 years of age, for birth of the first or second child only. Disbursement of the cash award will in future be linked to compliance with antenatal check up, institutional delivery by trained birth attendant, registration of birth and BCG immunisation.

4.A Family Welfare-linked Health Insurance Plan will be established. Couples below the poverty line, who undergo sterilisation with not more than two living children, would become eligible (along with children) for health insurance >(for hospitalisation) not exceeding Rs.5000, and a personal accident insurance cover for the spouse undergoing sterilisation.

5.Couples below the poverty line, who marry after the legal age of marriage, register the marriage, have their first child after the mother reaches the age of 21, accept the small family norm, and adopt a terminal method after birth of the second child, will be rewarded.

6.A revolving fund will be set up for income-generating activities by village-level self help groups, who provide community-level health care services.

7.Creches and childcare centres will be opened in rural areas and urban slums. This will facilitate and promote participation of women in paid employment.

8.A wider, affordable choice of contraceptives will be made accessible at diverse delivery points, with counselling services to enable acceptors to exercise voluntary and informed consent.

9.Facilities for safe abortion will be strengthened and expanded.

10.Products and services will be made affordable through innovative social marketing schemes.

11.Local entrepreneurs at village levels will be provided soft loans and encouraged to run ambulance services to supplement the existing arrangements for referral transportation.

12.Increased vocational training schemes for girls, leading to self-employment will be encouraged.

13.Strict enforcement of Child Marriage Restraint Act, 1976.

14.Strict enforcement of the Pre-Natal Diagnostic Techniques Act, 1994.

15.Soft loans to ensure mobility of the ANMs will be increased.

ANNEXURE − III

Annexure referred in reply to Lok Sabha Unstarred Question No. 2584 dated 5th December 2001.

Fourteen National Socio-Demographic Goals for 2010 enumerated in The National Population Policy, 2000

1.Address the unmet needs for basic reproductive and child health services, supplies and infrastructure.

2.Make school education up to age 14 free and compulsory, and reduce dropouts at primary and secondary school levels to below 20 percent for both boys and girls.

3.Reduce infant mortality rate to below 30 per 1000 live births.

4.Reduce maternal mortality rate to below 100 per 100,000 live births.

5.Achieve universal immunization of children against all vaccine preventable diseases.

6.Promote delayed marriage for girls, not earlier than age 18 and preferably after 20 years of age.

7.Achieve 80 percent institutional deliveries and 100 percent deliveries by trained persons.

8.Achieve universal access to information/counseling, and services for fertility regulation and contraception with a wide basket of choices.

9.Achieve 100 per cent registration of births, deaths, marriage and pregnancy.

10.Contain the spread of Acquired Immunodeficiency Syndrome (AIDS), and promote greater integration between the management of reproductive tract infection (RTI) and sexually transmitted infractions (STI) and the National AIDS Control Organisation.

11.Prevent and control communicable diseases.

12.Integrate Indian System of Medicines (ISM) in the provision of reproductive and child health services, and in reaching out to households.

13.Promote vigorously the small family norm to achieve replacement levels of total fertility rate (TFR) of 2.1.

14.Bring about convergence in implementation of related social sector programs so that family welfare becomes a people centered program.